

death a desirable boon. The symptoms during an attack are—sensation of straitness in the stomach, with exquisite unintermitting pain, the pain shooting into both hypochondria; dry retching, and rejection of every kind of food and medicines; the countenance, during the attack, pale and expressive of distress. He is not able, (although his sufferings make him very attentive to this point,) to trace any connexion between his complaint and different kinds of food. The attacks usually seize him in bed, sometimes set in at once with great intensity, at other times commence with comparative mildness, progressively increase in intensity, and then disappear gradually in the same manner as they came on. He is rendered somewhat more liable to an attack by confinement of the bowels, and feels relieved after full evacuations; the agony suffered until these are procured is extreme, and even then the relief comes but slowly, and always leaves an internal soreness about the epigastrium, which continues with very little diminution for weeks, and is always proportionate to the previous intensity of the pain. The average frequency of the attack is about one in every two or three months. He resides in the country, but during his present visit to town he has had one of his attacks, which gave me an opportunity of seeing him in it. It came on late in the evening, without any apparently assignable cause, the pain, as he had in his previous account of some of the fits described it, being at first slight, but steadily increasing in intensity, accompanied with great anguish, rejection of every thing from the stomach, and frequent retching: the eyes were watering, countenance pale, and expressive of great suffering. The previous history leading me to view the disease as arising from morbid sensibility of the nerves of the stomach, I had determined, should an opportunity offer while the patient was under my immediate observation, to exhibit opium. I should, perhaps, have observed, that all the preceding attacks had been treated in the country by bleeding or leeching, purgative medicines, and enemata. I gave him fifteen drops of *tinct. opii* in half a glass of tepid water, without an admixture of any of the stimulants or aromatics, as ether, fœtid tincture, &c., which are frequently, but, I believe, injudiciously, in many cases added to opium, under the supposition of increasing its virtues. In a few minutes after taking the draught the stomach became settled, the pain was checked in its progressing intensity, and soon after began to die away, leaving behind it a very trifling soreness, which had nearly quite disappeared on the following morning. This was the first occasion on which he had passed through an attack in this manner.

From the date of the above observations, Sept. 1828 to July, 1831, I had frequent opportunities of seeing this gentleman, and he never, during that space of time, experienced any symptom of relapse. Since July, 1831, I have not seen him, but I may be almost certain, from his silence, that he has continued to enjoy the same immunity up to the present May, 1832.

Concerning alkalies I may remark, that the liquor potassæ causticus, although not so well suited to be used as a domestic medicine, is much preferable to magnesia in relieving acidity and heart-burn.—*London Medical and Surgical Journal*, July, 1832.

13. *Furious Delirium, consequent on the Repercussion of Erysipelas, cured by recalling the Inflammation.*—A man, aged forty-five years, was wounded the 24th November last in the thigh by a stabbing instrument, which penetrated four inches, and grazed the femoral artery without injuring it. M. Blandin found him in the following state: face red, pulse 100, head-ache; the edges of the wound red and painful; he was bled and put on low diet. The next day but one his state was very alarming; face red, pulse 130, look wild and stern; complete loss of intellectual faculties, furious delirium, violent movements of the limbs, &c. On interrogating his parents as to what had passed, M. B. learned that the thigh, in the situation of the wound, had become of a purple red some hours after his visit, with great heat and pain, and that they had applied on the part compresses dipped in cold water and vinegar; that under the

influence of this treatment, the redness, and even the pain, had completely disappeared; and there remained but a slight yellowness in the part, and finally, that the cerebral symptoms came on suddenly afterwards with extreme violence. M. Blandin immediately bled him, applied twelve leeches behind the ears, sinapisms to the feet, a purgative injection, and friction with tartar emetic ointment, to the part which had been the seat of the erysipelas. The fifth day the inflammation returned, and extended over the internal and superior third of the thigh. The cerebral symptoms disappeared, and the patient complained only of head-ache and lassitude. The following days the erysipelas extended, and considerable fever set in; this was combated by frictions with mercurial ointment, and in eight days the patient was completely recovered.—*Archives Générales*.

14. *On the Treatment of Habitual Constipation.* By ROBERT J. GRAVES, M. D. &c.—In many chronic diseases, and in habitual constipation, it is of the greatest consequence to procure daily and regular discharges from the bowels. *Laxements* effect this purpose most conveniently, and possess the advantage of not interfering with or weakening the digestive functions, of the stomach and upper portion of the alimentary canal. Many persons, however, particularly females, have an insuperable objection to this method of obtaining relief, and acquire the habit of taking aperient medicines whenever their bowels are confined.

Various causes have combined to render blue pill and calomel almost popular remedies, to which many have recourse when their bowels are irregular, or the stomach out of order. Indeed, it is quite incredible what a number of persons are in the habit of taking these preparations, either by themselves, or combined with other purgatives, whenever, to use the common expression, they feel themselves bilious. This habit sooner or later induces a state of extreme nervous irritability, and the invalid finally becomes a confirmed and unhappy hypochondriac; he is, in fact, slowly poisoned, without the more obvious symptoms of mercurialization being at any time produced.

It is almost unnecessary to observe, that although saline aperients give temporary relief, they afterwards increase the tendency to constipation, and weaken the stomach. The class of purgatives least liable to objection consists of magnesia, aloes, rhubarb, colocynth, &c. for exhibiting which, many well-known and excellent formulæ are used. But even these substances, whose debilitating effects on the stomach are not near so great as that of mercurials and salts, are attended with the disadvantage of being required in larger doses in proportion as the bowels become accustomed to their action. To remedy this evil, Dr. Elliotson has suggested a valuable combination, consisting of compound extract of colocynth with minute doses of croton oil. This I have frequently given with the best effects; but it is liable to a serious objection, for unless the croton oil be perfectly mixed with the mass, some of the pills may be too powerful, while the others are comparatively inert, and consequently the patient is exposed to the danger of hypercatharsis, as I have twice witnessed, although in both cases the medicine had been prepared in the shop of a respectable apothecary. The following combination will, in general, serve to obviate costiveness, without diminishing the appetite, or being attended with the necessity of the dose being increased as the patient becomes accustomed to its use:—℞. Electuarii sennæ, ℥ii.; Pulv. supertart. potassæ, ℥ss.; Carbonatis ferri, ℥ii.; Syrupi zingiberis, q. s.; Ft. electuarius. For the first few days I generally add about two drachms of sulphur to this electuary; but as soon as its operation has been established, the quantity of sulphur may be diminished one-half, and at the end of a week it may be omitted altogether. The dose must be regulated by its effects, but in general a small tea-spoonful in the middle of the day and at bed-time will be sufficient.

The value of the carbonate of iron as a tonic aperient has not been duly appreciated; I have succeeded in curing, with it alone, a practitioner of emi-